

SUNNY RIDGE

3014 ERIE AVENUE

SHEBOYGAN

53081

Phone: (920) 459-3028

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/01): 319

Total Licensed Bed Capacity (12/31/01): 341

Number of Residents on 12/31/01: 284

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 282

County

Skilled

No

Yes

Yes

282

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.6
Supp. Home Care-Personal Care	No					1 - 4 Years		43.3
Supp. Home Care-Household Services	No	Developmental Disabilities	1.1	Under 65	9.5	More Than 4 Years		33.1
Day Services	No	Mental Illness (Org./Psy)	32.0	65 - 74	10.2			-----
Respite Care	No	Mental Illness (Other)	7.7	75 - 84	31.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	40.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.4	95 & Over	8.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.7		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	8.8	65 & Over	90.5	-----		
Transportation	No	Cerebrovascular	14.8		-----	RNs		8.3
Referral Service	No	Diabetes	2.5	Sex	%	LPNs		5.8
Other Services	No	Respiratory	7.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.5	Male	30.3	Aides, & Orderlies		
Mentally Ill	Yes		-----	Female	69.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	10	100.0	305	178	79.1	98	0	0.0	0	41	83.7	135	0	0.0	0	0	0.0	0	229	80.6
Intermediate	---	---	---	43	19.1	82	0	0.0	0	8	16.3	135	0	0.0	0	0	0.0	0	51	18.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	0.4	154	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.4
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	3	1.3	325	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	1.1
Total	10	100.0		225	100.0		0	0.0		49	100.0		0	0.0		0	0.0		284	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	10.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	4.6	Bathing	14.8	14.1	71.1	284
Other Nursing Homes	6.5	Dressing	22.9	52.8	24.3	284
Acute Care Hospitals	68.6	Transferring	38.4	47.2	14.4	284
Psych. Hosp. -MR/DD Facilities	5.9	Toilet Use	25.7	56.7	17.6	284
Rehabilitation Hospitals	0.7	Eating	57.4	30.3	12.3	284
Other Locations	3.3	*****				
Total Number of Admissions	153	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.6	Receiving Respiratory Care	4.9	
Private Home/No Home Health	13.1	Occ/Freq. Incontinent of Bladder	57.4	Receiving Tracheostomy Care	0.7	
Private Home/With Home Health	13.7	Occ/Freq. Incontinent of Bowel	38.4	Receiving Suctioning	3.2	
Other Nursing Homes	3.9	Mobility		Receiving Ostomy Care	1.1	
Acute Care Hospitals	3.9			Receiving Tube Feeding	2.8	
Psych. Hosp. -MR/DD Facilities	3.9	Physically Restrained	3.5	Receiving Mechanically Altered Diets	52.1	
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	2.0			Have Advance Directives	91.2	
Deaths	59.5	With Pressure Sores	3.9	Medications		
Total Number of Discharges		With Rashes	0.0	Receiving Psychoactive Drugs	59.5	
(Including Deaths)	153					

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	82.7	81.4	1.02	84.7	0.98	84.3	0.98	84.6	0.98
Current Residents from In-County	92.6	84.1	1.10	82.2	1.13	82.7	1.12	77.0	1.20
Admissions from In-County, Still Residing	32.0	32.4	0.99	22.3	1.44	21.6	1.48	20.8	1.54
Admissions/Average Daily Census	54.3	64.0	0.85	89.0	0.61	137.9	0.39	128.9	0.42
Discharges/Average Daily Census	54.3	66.7	0.81	93.1	0.58	139.0	0.39	130.0	0.42
Discharges To Private Residence/Average Daily Census	14.5	19.2	0.76	37.0	0.39	55.2	0.26	52.8	0.28
Residents Receiving Skilled Care	80.6	85.0	0.95	89.9	0.90	91.8	0.88	85.3	0.95
Residents Aged 65 and Older	90.5	84.3	1.07	87.3	1.04	92.5	0.98	87.5	1.03
Title 19 (Medicaid) Funded Residents	79.2	77.7	1.02	73.2	1.08	64.3	1.23	68.7	1.15
Private Pay Funded Residents	17.3	16.8	1.03	19.8	0.87	25.6	0.67	22.0	0.78
Developmentally Disabled Residents	1.1	3.2	0.33	2.4	0.45	1.2	0.90	7.6	0.14
Mentally Ill Residents	39.8	56.2	0.71	42.5	0.94	37.4	1.06	33.8	1.18
General Medical Service Residents	21.5	15.4	1.40	25.0	0.86	21.2	1.01	19.4	1.11
Impaired ADL (Mean)	48.1	49.2	0.98	51.7	0.93	49.6	0.97	49.3	0.98
Psychological Problems	59.5	65.9	0.90	59.8	1.00	54.1	1.10	51.9	1.15
Nursing Care Required (Mean)	8.6	7.6	1.14	7.3	1.17	6.5	1.32	7.3	1.17